Disclosure Repor		1.6		1 14 1 1 1 11	Yes No
Use this form for general Do not use this form to u		information, must be	e signed and su	ibmitted along with c	other detailed forms.
Committee Informat					
Full Name					c. ID Number
JOSEPH CAUSEY FOR	R BOARD OF EDUCA	TION			
b. Mailing Address (include (City, State and Zip Code)				d. Date Filed
P.O. BOX 189	•				
SHALLOTTE, NC 2845	9				e. Phone Number
			**************************************		910-232-7222
2. Report Year 3. P	eriod Start Date (mm/	nd/vvi	End Date	5. Treasurer Ful	l Name
	CHARLES STATE OF THE PARTY OF T	(mm/dd/yy)	ESTANCE NO.	JOSEPH E. DUC	
2016				· SOBERT E. DOQ	(OLITE, III.
6. Type of Committee (Check One)	9. Type of Repor	t (check or	nly one type of repor	t from one category)
Candidate Campaign	Party	Municipal		County	Referendum
☐ PAC	Referendum	Organizationa	մ 🛛	Organizational	☐ Organizational
Independent Expenditure	Joint Fundraiser	Thirty-five da	у	Quarterly	Pre-referendum
Legal Expense Fund					
	applicable, check one)	Pre-primary		First	Final
"Booster Fund" Building Fund		Pre-election Pre-runoff	IH	Second Third	Supplemental Final Annual
		Semi-annual	l ii	Fourth	Special
_		Mid Yea	r _	Semi-annual	
Other:		Year End	¹	Mid Year	10. Special Report Name
Number of Europe	we Able Downey	1 =	ᅵ님	Year End Final	
8. Number of Fundraise	rs this Keport	Special		Special	*
11. Account Information			11. Account		
a. Financial Institution Full N				stitution Full Name	
CRESCOM BANK	,				
b. Purpose	c. Account Code		b. Purpose		c. Account Code
CAMPAIGN	Joey				
COMMITTEE					
	d. Period Begin Balanc	e			d, Period Begin Balance
	\$ 0				\$
CERTIFICATION					
I certify that the Committ	ee or Fund is in compl	iance with all applica	able provisions	of Article 22A, 22B	, & 22D-22M of Chapter 163 of
the NC General Statutes a	and that no funds are co	mmingled with prob	nibited or other	non-disclosed funds	. I further certify that this report
is complete, true and corr		n trained by the NC	State Board of	Elections.	1/24/11
JOSEPH E. DUC	Inted Name of Signer		ignature of Appoir	nted Treasurer	Date
FOR OFFICE USE ONLY				The state of the s	Santania y Santania
Date Received:		Employee:	<	WINDO TO	Delivery Method
		Zimpioyee.		官院臣」	Normal Mail
Date Postmarked:		Employee:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Registered Mail Hand Delivered
Date Scanned:		Employee:		FED - 1 2016	Electronically Filed
Date Beamied,		Employee.		FED	Signer has not received
Date Data Entered:		Employee:	1 1 1 1 2 2 2 2 2 2		mandatory training
				Division of the second	
Please Note: This for					ess, treasurer, assistant treasurer,
		an of books informat			1 68
You	must amend the State	ment of Organization	1 (CKO-2100A	-E) to make commit	ree changes.

Amendment

CRO-1000

Aggregated Contributions from Individuals	Page	_1_	of	1_	Amendment Yes	No
Optional form used to report NC Contributions From Individua	als of \$5	0 or les	S	•		

	e (and Fund if applicat			ID Number
JOSEPH CI	mus ey for.	BARRED OF E	EDUCATION	
Contributor Informa		GASTA GERMANIA		
Amend b. Account Co	de c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	ř. Amount
Add Remove	CHEEK	40	1/8/14	\$ 25-
Add Remove	CHECK		12/30/15	\$ 25-
Add Remove				\$
Add Remove				\$
Add Remove			=	\$
Add Remove				\$
Add Remove			10.00	\$
Add Remove				s
Add Remove				\$
Add Remove				\$
Add Remove				\$
Add Remove				\$
Add				\$
Add Remove				\$
Add				\$
Add P				\$
Add .				\$
Add Add				\$
Remove Total only this Pa	ge		1 \$	
Total of ALL CR			\$	

Cont	tributions fro	m Individuals	S	D-	1		Amendme	40.4
Use thi	s form to report in	dividual contribution	s over \$	Pg 550 or contributions und	der \$50 if form C	of <u> </u>	L Ye	s 💹 No
1. Con	imittee Full Name	and Fund if applie	cable)			2. ID N		
Jo	450H	Austy &	RE	BORAS OF	#an car			
J. Com	tributor informat	ion			move	- pas		
	ame, Mailing Address	& Phone		b. Job Title/Profession		d. Comm	ents	
	de city, state, & zip)			FETTLE	^	6	m PAIS	74/
72	expy CI	YESTNUT		c. Employer's Name/Sp		_		
1	2648 CA	PEEK Nu	9	NIA		Co	KTR. B.	עם נד מ
	AKINA, I			10/1		e. Election	n Sum to Date	
f. Prior	g. Account Code	h. Form of Payment	i. In	-Kind Description	j. Date (mm/dd/y			
		CHECK			16	3331	k. Amount	
			+-		1/0//	6		0-
	 	 	+-		 		\$	
3 Cont	ributor Information						\$	
	me, Mailing Address				nove			
	e city, state, & zip)			b. Job Title/Profession		d. Comme		
M	A HAR	REH		RETIA			MAIFA	
3	253 01	ar Do		c. Employer's Name/Spo	ecific Field	Cel	UTZIBA	TION
				NA		e. Election	Sum to Date	
54	PHOTTE	, NC				\$	600	
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/yy		k. Amount	
		CASA			1/2.		\$	
			†		1100	16		
П			+-				\$	
3. Contr	ibutor Informatio	n		A 1			\$	
	ne, Mailing Address &			Add Remo	ove	1.6		
(include	city, state, & zip)			S S S S T NICH T O C S S O N		d. Commen	ts	
				a Familia de la constante de l				
				c. Employer's Name/Spec	cific Field			
						e. Election S	um to Date	Biograph I
·						\$		
. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yyy	y)	k. Amount	
							\$	
							\$	
							\$	
	only this Page					\$	60 02	
	of ALL CRO-						70 -	
(This line	must be on line 6 of De	etailed Summary Page Ch	RO-1100)			\$		

Use CRO-1215 if In-Kind Contributions were or will be refunde		vices provided to t ays.				
1. Committee Full Name (and Fund if applicable)			2. Ⅱ	Number		
JOSEPH CAUSEY FOR BOARD OF EDUCATION						
3. Contributor Information Add	Remove					
a. Full Name, Mailing Address & Phone		Contributor	c. Co	mments		
(include city, state, & zip) B. JOSEPH CAUSEY, JR.		lividual ndidate				
P.O. BOX 189	Ca					
SHALLOTTE, NC 28459	PA	•				
	Re	ferendum	d. Election Sum to Date			
	Oti	her Receipt Source	\$	157.00		
e. Description		f. Date (mm/dd/y	ууу)	g. Fair Market Amount		
FILING FEE		12/02/201	5	\$ 157.00		
				\$		
				\$		
3. Contributor Information Add	Remove		3000			
a. Full Name, Mailing Address & Phone	b. Type of	Contributor	c. Cor	nments		
(include city, state, & zip)		ividual				
BUSEPH CHUSEY BOX 179	Car Par	ndidate				
Box 189	PA	•				
		erendum	d. Ele	d. Election Sum to Date		
5 HALLOTTE, NC 28459	Oth	er Receipt Source	\$	1100		
e. Description		f. Date (mm/dd/yy	уу)	g. Fair Market Amount		
PURCHASE NAME TA	6			\$ 1100		
				\$		
				\$		
	Remove		15134	ME TO ALL FOR MAN		
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Type of C		c. Con	nments		
		ividual didate				
B. JOSEPHI CAUSIN	Part					
	PAG	S				
Roy BG		erendum	d. Elec	ction Sum to Date		
Box 189						
B. JOSEPHI CAUSING BOX 189 SHALLOTTE, NC 28459		er Receipt Source	\$	69 54		
e. Description			L	69 59 g. Fair Market Amount		
e. Description		er Receipt Source	L	g. Fair Market Amount		
		er Receipt Source	L			
e. Description		er Receipt Source	L	\$		

5. Total of ALL GRO-1510 Pages

(This line must be on line 17 of Detailed Summary Page CRO-1100)

167.00

				Amendment			
In-Kind Contributions		Pg 2 0	f <u> </u>	Yes No			
Use this form to report non-monetary contributions, donations, go Use CRO-1215 if In-Kind Contributions were or will be refunded	oods or serv	rices provided to	the com	mittee or fund.			
1. Committee Full Name (and Fund if applicable)	a within / Q	ays.	2 11	D Number			
		4-					
JOSEPH CAUSEY FOR BON		r Esa-	SAT	IRA			
a. Full Name, Mailing Address & Phone	Remove	Contributor	I . C.				
(include city, state, & zip)		lividual	c. Co	mments			
BOSSON CAUSEY	┦ ☴	ndidate					
BN 189	PA	C ferendum	d. Ele	d. Election Sum to Date			
SHALL WITE, NC 28 459		ner Receipt Source		5780			
e. Description		f. Date (mm/dd/y	yyy)	g. Fair Market Amount			
Ofen CAMPAIGN BANK A	CCT.			\$			
				\$			
				\$			
3. Contributor Information Add	Remove	Sin a Sphilistorias	ALC: YES				
a. Full Name, Mailing Address & Phone	b. Type of	Contributor	c. Co	mments			
(include city, state, & zip)	Ind	ividual					
AMMVDA FICHMEDSON		ndidate					
116 PINE LAKE CIR	Pari	•					
		erendum	d. Ele	ction Sum to Date			
OCEAN ISLE BEACH NO	=	er Receipt Source		70 00			
e. Description		f. Date (mm/dd/y)	/уу)	g. Fair Market Amount			
PRIMIOTIONIAL PHOTOS				\$			
				\$			
				\$			
	Remove						
a. Full Name, Mailing Address & Phone	b. Type of (c. Con	nments			
(include city, state, & zip)	1 =	vidual					
	Part	didate v					
	PAC	•					
	Refe	Referendum		ction Sum to Date			
	Othe	er Receipt Source	\$				
e. Description		f. Date (mm/dd/yy	yy)	g. Fair Market Amount			

4. Total only this Page
5. Total of ALL CRO-1510 Pages

\$

\$

\$

\$ \$ Detailed Summary
Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment
Yes

No

1. Committee Full Name (and Fund if applicable)	2. Type of l	Repo	rt 27 F 2013 3.	ID Number	
JOSEAN CAUSEY FOR MANDE	F ESU	C/17	1000		
Start of Election Cycle: January 1, 215			Total this eporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$	20-	\$ 260-	
RECEIPTS	學學院。		ない。 では、 では、 では、 では、 では、 では、 では、 では、		
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	50	\$ 50-	
6) Contributions from Individuals	(CRO-1210)	\$	160	\$ 160 -	
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$		\$	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$	
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$		\$	
11c) Outside Sources of Income	(CRO-1250)	\$		\$	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$		\$	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c,	,11d and 11e)	\$		\$	
EXPENDITURES	建筑	4119	以中,到最高。"我 _{是这}	學 1 127 13 新聞	
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$	0	\$ 0	
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$		\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$		\$	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$		\$	
15) Loan Repayments	(CRO-1420)	\$		\$	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$		\$	
17) In-Kind Contributions	(CRO-1510)	\$	35739	\$ 357 39	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1	5, 16 and 17)	\$		\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then su	btract line 18)	\$		\$	
ADDITIONAL INFORMATION		218	7年 ,A AESTA	The investment	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$			
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$			
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$			
24) Account Transfers Within the Committee	(CRO-1720)	\$			
25) Administrative Support	(CRO-1710)	\$	· · · · · · · · · · · · · · · · · · ·	\$	
26) Forgiven Loans	(CRO-1440)	\$		\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$		\$	
28) Contributions to be Refunded	(CRO-1215)	\$		\$	